DATE	CONVE	DCION	CHART
KAIL	CUNVE	KSIUN	L.HAKI

(ml/hr to gtts/min)
Drip Rate in gtts/min

	Ι	Orip Rate in gtts/mi	n	
IV Rate	15 gtts/ml	10 gtts/ml	20 gtts/ml	60 gtts/ml
ordered in ml/hr	(Abbott)	(Travenol)		
1	0	0		1
5	1		2	5
10	3	2	3 10	
				2
20	5	3	7	20
30	8	5	10	30
40	10	7	13	40
			0,	
50	13	8	17	50
75	19	13	25	75
100	25	17	33	100
		0.0	r	
125	31	21	42	125
150	38	25	50	150
200	50	× 33	67	200
3000	75	50	100	300
To get gtts/min.,				
you may also				
divide the order	c.O			
given in ml/hr	4	6	3	1
by:				
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INTRAVENOUS ADMIXTURES

DOPAMINE: Mix 800 mg in 500 ml IV fluid. Makes 1600 micrograms ml (mcg/ml).

Dopamine Drip Rate

(mcgtts/min)

W	/e	įσ	ht
		-۲	116

		Lbs	88	132	176	2 220
		Kg	40	60	80	100
	Mcg/kg/min				0,	
	5		7	11	15	19
	10		15	23	30	38
1	20		30	46	60	76
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MAINE EMS DRUG / MEDICATION LIST

The following are medications currently approved for use by Maine EMS licensees - as authorized by the Maine EMS Protocols. This list may be altered through protocol revision.

Prehospital Medications:

Activated Charcoal (without sorbitol)

Adenosine

Albuterol

Amiodarone

Aspirin

Cyanide poisoning kit contents

Dextrose (D10, D50)

Diphenhydramine

Dopamine

Epinephrine (1:1000, 1:10,000)

Epinephrine Autoinjector

Fentanyl

Glucagon

Heparin Solution (for use in maintaining IV access in a heparin lock only; otherwise this is not considered a prehospital medication. Approved also at Intermediate level).

Ipatromium Bromide (Combivent)

Magnesium Sulfate

Methylprednisolone (Solu-Medrol)

Metoprolol (Lopressor)

Midazolam (Versed)

Naloxone (Narcan)

Nitroglycerin (Non-parenteral)

Nitrous Oxide

Ondansetron (Zofran)

Tetracaine Ophthalmologic Drops

Sodium Bicarbonate

user 10/19/10 9:28 PM

Comment: MDPB - Will Need to be re-evaluated a the end of the protocol review as we will likely add/subtract medications

TELEPHONE / RADIO REFERENCES / CONTACT NUMBERS

NAME RADIO FREQ PHONE #

Hospital:
Hospital:
Hospital:
Hospital:
Hospital:
Dispatch:

State wide EMS Frequency 155.385

Maine EMS: Phone: 626-3860; Fax: 287-6251 e-mail: maine.ems@maine.gov www.maine.gov/dps/ems

Jay Bradshaw, Director

Drexell White, EMT-P, EMD Coordinator Dawn Kinney, EMT-P, Licensing Agent Alan Leo, EMT-B, Licensing Agent

Jonathan Powers, EMT-P, Preparedness Coordinator Kerri Pomelow, EMT-P, Education & Training Coordinator

Medical Director: Matthew Sholl, M.D.

e-mail: shollm@mac.com

Region 1 – Southern Maine EMS 741-2790

e-mail: smems@smems.org
Donnie Carroll, Coordinator

Medical Director: Marlene Cormier, M.D.

Region 2 Tri-County EMS 795-2880

e-mail: <u>lebrunj@cmhc.org</u> Joanne LeBrun, Coordinator

Medical Director: Rebecca Chagrasulis, M.D.

Region 3 – Kennebec Valley EMS 877-0936

e-mail: office@kvems.org Rick Petrie, Coordinator

Medical Director: Timothy Pieh, M.D.

Region 4 – Northeast EMS 974-4880

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e-mail: neems@emcc.edu Rick Petrie, Coordinator

Medical Director: Jonnathan Busko, M.D.

Region 5 – Aroostook EMS 492-1624 e-mail: arems@maine.rr.com Steve Corbin, Coordinator

Medical Director: Peter Goth, M.D.

Region 6 – Mid-Coast EMS 785-5000 e-mail: <u>office@midcoastems.org</u> Bill Zito, Coordinator

Medical Director: Whitney Randolph, D.O.

Maine ACEP Representative/Assistant State Medical Director

Steve Diaz, M.D.

e-mail: steve.diaz@mainegeneral.org

Bio-Terrorism / WMD

If you suspect a chemical or biological agent threat, call your local law enforcement agency immediately.

Maine Bureau of Health Emergency

Reporting and Consultation 1-800-821-5821

Maine National Guard 11th Civil Support Team (WMD) 207-877-9623

Maine Emergency Management Agency 207-624-4400

To Report Workplace Injury:

Bureau of Labor

Business Hours

Evenings & Weekends

207-623-7923

207-592-4501

NON-EMS SYSTEM MEDICAL INTERVENERS

Thank you for your offer of assistance.

Please be advised that these Emergency Medical Technicians are operating under the authority of the State of Maine and under protocols approved by the State of Maine. These EMS providers are also operating under the authority of a Medical Control physician and standing medical orders.

If you are currently providing patient care, you will be relinquishing care to these EMS personnel and their Medical Control physician.

No individual should intervene in the care of this patient unless the individual is:

- 1. Requested by the attending EMT, and
- 2. Authorized by the Medical Control physician, and
- 3. Is capable of assisting, or delivering more extensive emergency medical care at the scene.

If you are the patient's own physician, PA, or nurse practitioner, the EMTs will work with you to the extent that their protocols and scope of practice allow.

If you are not the patient's own physician, PA, or nurse practitioner, you must be a Maine licensed physician who will assume patient management and accept responsibility. These EMT's will assist you to the extent that their protocols and scope of practice allow. They will not assist you in specific deviations from their protocols without Medical Control approval. This requires that you accompany the patient to the hospital, and that their Medical Control physician is contacted and concurs.